



Meeting: POWH/SSEH Community Advisory Committee
Date: Monday 14th April 2014

Chair: Mr G Constantin (chair)
Minutes: Ms K Smith (EA to DON)

1. Attendance/Apologies

Attendance	H. Walker (POWH DON), N. Turner (Consumer), S. Nicholson (Consumer), A. Eleftheriou (Consumer), S. Magee (Consumer), C. Smith (SSEH), G. Constantin (Chair & Consumer), J. Roberts (DO), J. Titterton (Consumer), P. South (Consumer), D. Kennedy (Community Partnerships Officer), J. West (consumer)
Apologies	B. Rabet (NM to DON), M. Carvalho-Mora (Consumer), T. Kant (Consumer), N. Turner (Consumer)

Presentations

Complaints – Quarterly Report
Carolyn Coleman (*Manager
Clinical Practice & Improvement
Unit*)

Presentation given and discussion held around the key themes identified with recent complaints/compliments J West raised concerns regarding a complaint about the phone system within POWH – a patient was allegedly on hold for over 2 hours for the Outpatients department to later find out that the department was closed. Manager CPIU stated that this had been an issue and action taken with the implementation of an automated voice message on the phones to stop this from recurring. It was thought that this had occurred on a public holiday.

C Coleman identified that communication is the cause of a large portion of complaints; these complaints are raised in the forums within POWH/SSEH at a senior / executive level and the staff at the unit level with problem solving and provide information to try and avoid the situation in the future. A frontline communication course is provided for frontline staff.
Incorrect patient information has been a current trend. Director Operations advised that from a ministerial point of view waiting times are the most common complaint – the perception or expectation that patients should be reviewed or had their surgery earlier.

G Constantin suggested perhaps there would be merit in creating a category of complaints and complaints are listed according to those categories.

REACH Initiative
Karlie Foster (*CERS CMC*)

Presentation given on REACH: In summary; POWH/SSEH have a PACE (rapid response) program which is a well-established a track and trigger system for early intervention and detection of deteriorating patients.

<p>REACH;</p> <ul style="list-style-type: none"> • Recognise • Engage • Act • Call • Help is on its way 	<p>A tool kit will be created on how REACH works across POWH/SSEH – engaging local champions across each ward, executive sponsorship, and flexibility as it will be implemented throughout both hospitals, education will be planned to staff.</p>
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2. Minutes

2.1	Confirmation of minutes	The minutes from the March meeting were confirmed
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3. Actions/ Plans arising from previous minutes

Issue	Discussion	Action Required	Who	Due
3.1	Welcome to the new chair	Mr G Constantin was welcomed as the new chair		

4. Standing Items

Issue	Discussion	Action Required	Who	Due
4.1	POWH/SSEH Update by Hospital Executive	Director Operations provided the POWH Update: <ul style="list-style-type: none"> • -A sub group under the clinical council has formed to look at developing a strategic plan for the Northern sector. The group will look at the vision for the hospitals. The draft vision suggested is to promote 'leadership in patient centred care supported through innovation and excellence in teaching and research'. The Chief Executive Mr G Marr, plans to deliver roadshows throughout the 	Noting only	

	<p>LHD in May giving an overview of key priorities and challenges within the health system.</p> <ul style="list-style-type: none"> The A/Chief Executive is here for an interim period of approximately 6 months. The Board have advised that advertising will be on an international level. There has been noted consistent performance improvement in transfer of care (TOC) and NEAT, which has been acknowledged by the latest newsletter from the Ministry of Health. A number of strategies have been implemented to assist Core strategies have been introduced to improve this including a Navigator role within the Emergency department which has now been extended to 7 days a week up until end June and then for evaluation. International Nurses Day will be held on the 12th & 13th of May. 12th of May International nurses day awards 13th of May Nursing and Practice development symposium <p>C Smith provided the SSEH Update:</p> <ul style="list-style-type: none"> Volunteer appreciation day was successful. SSEH are currently looking at the Bicentennial eye clinic waiting rooms due to the confine space of the clinic and the need for patients to bring their carers –benches have been placed on the veranda. Patient stories are being collected from the hand and the eye patients. Monthly staff forums continue. 	<p>J Roberts</p>	<p>Dates to be emailed</p>	<p>May</p>
4.2	<p>Clinical Council Feedback</p>		<p>Noting only</p>	
4.3	<p>Community Partnerships Update</p>		<p>Noting only</p>	
	<p>D Kennedy provide an update: Save the dates:</p> <ul style="list-style-type: none"> Expo 2014 – Friday the 15th of August 2014 Mental Health – Connecting for a healthier life -Wednesday the 12th of November 2014 <p>Consumer committee engagement framework for the district has now</p>			

		been completed – it will appear soon on the Intranet/Internet.			
		A meeting has been set up with Mr G Marr for Mr G Constantini and a representative with the RHW to discuss community and consumer information on integrated services and population health The consumer and community charter for this committee is under review and due for name change – with reference to standard 2			
4.4	Community Advisory Members questions	<p>J West raised concerns around why the Outpatients Department are closed on certain dates. H walker explained the option for select services to have a consolidated hospital wide ADO within their department to assist with consistency within the service of staffing levels and having only one day per month with closure of an elective services;. J Roberts explained that the Clinical Council is currently looking at Outpatients department and looking at a range of practices as to how improvements can be made in the department</p> <p>S Nicholson raised concerns around the security department and limited availability to do ID cards between 12-2pm. Suggested signage was not well advertised.</p> <p>A group of former nurses of POWH were recently given a tour of POWH and complimented staff on the welcomed they received.</p>	Noting Only		
4.5	Complaints and Compliments – monthly review	Consumer representatives provided updates on the following meetings attended:			
4.6	Minutes from Committee	<p>J Titterton: Access/Cleaning Meeting:</p> <ul style="list-style-type: none"> POWH is doing well with NEAT and transfer of care targets. Discharge times could still improve– trying to get confirmed discharges by 10am There is a push to get EDD (estimated date of discharge) implemented throughout the hospital and keeping it updated regularly <p>S Nicholson: Clinical Handover Planning Standard 6</p> <ul style="list-style-type: none"> A person has been appointed for up to 4 months for 3 days a week to help the staff in the clinical handover planning New discharge summary has been updated – Medicare local has 	Noting only		

	<p>requested that the medical recommendations come first on the discharge summary as well as the reasons for any changes in medication</p> <p>SSEH Clinical Quality and Risk Management committee:</p> <ul style="list-style-type: none"> • Discussion held around the diversity health report on aboriginal patients • Concerns raised about patients coming back to emergencies within 24 hours of discharge • Cost benefits of producing disposable instruments within theatre discussed. • Refurbishment of the Eye Clinic was discussed. • A district CNC has been appointed to work within the perioperative area. 	
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5. General Business

Issue	Discussion	Action Required	Who	Due
5.1	Progress report on National HH initiative	Report not available	B Rabet	Prior to next Meeting

6. New Business without notice

7. The next meeting will be held on Monday 12th May 2014 – POWH EDU A

There being no further business the meeting closed at 5.45pm

Accepted as a true record:  Date: 20/5/14

Signature Chair: CONSTANCE Chair:  Date: 20/5/14